SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Rayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

7

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Bayfield Co. Zoning Dept.

JUN QB 2016

TYPE OF PERMIT REQUESTED-

☐ LAND USE

☐ SANITARY

PRIVY

CONDITIONAL USE

SPECIAL USE

1627

75-373-0127

Cell Phone:

OTHER

City/State/Zip:

Washburn

Mailing Address:

78875

opertund Heidi

Haas

ddress of Property:

Authorized Agent: (Per

No.

Peder

U N

If of Owner(s))

7,5-3-73-251-7 Agent Phone:

Agent Mailing

Address (include City/State/Zip):

Mashing ton

Contractor Phone:

Plumber:

200

715-209-1089

Plumber

r Phone:

City/State/Zip:

PROJECT LOCATION

Legal Description:

(Use Tax Statement)

04-00 8-2

-49-04-20-2

2

Volume Subdivision:

Page(s)

Recorded Document: (i.e.

i.e. Property Ownership)

N_o

Attached N/A Written

Authorization

BAYFIELD COUNTY, WISCONSIN

ENTERED

Permit #:

6

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PAID

Amount Paid:

\$75

6-20-16

Section

, Township

N, Range

5

_1/4,

1/4

Gov't Lot

Lot(s)

1380 S

 \bar{c} Vol & Page

288

Lot(s) No.

Block(s) No. 000-it 000

Value at Time of Completion donated time & ON Non-Shoreland Shoreland * include 8 New Construction ☐ Run a Business ☐ Addition/Alteration $\hfill\square$ Is Property/Land within 1000 feet of Lake, Pond or Flowage ☐ is Property/Land within 300 feet of River, Stream (inc. Intel Creek or Landward side of Floodplain? If yes--continu Relocate (existing bldg) Conversion Project 9 # of Stories and/or basement 2-Story No Basement Foundation 1-Story 1-Story + Loft Basement If yes-Year Round continue Seasonal Towns Use mittent) Distance Structure is from Shoreline: Distance Structure None wN **및** # (New) Sanitary Compost Toilet Municipal/City is from Shoreline What Type of Sewer/Sanitary System is on the property? feet Specify Type: Is Property in Floodplain Zone?

Yes

No Are Wetlands
Present?

Pes
No X Well Z Water City

(If permit being applied for is relevant to it)

Length:

Width:

Height:

None

Existing Structure: (If per	mit bei	Existing Structure: (if permit being applied for is relevant to it) Length: Width:		Height:	
Proposed Construction:				Height:	3
Proposed Use	٧	Proposed Structure		Dimensions	Square Footage
A sharp the state of the state		Principal Structure (first structure on property)		Х)	
		Residence (i.e. cabin, hunting shack, etc.)	_	×	
		with Loft	_	×	
Residential Use		with a Porch	_	×	
		with (2 nd) Porch	_	×	
		with a Deck		×	
		with (2 nd) Deck		×	
☐ Commercial Use		with Attached Garage	_	×	
		Bunkhouse w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities)	s)	х)	
		Mobile Home (manufactured date)	_	×	-
:	X	Addition/Alteration (specify), Parch Wollinger Monder Fig.	X	×	2
☐ Municipal Use	M)	Accessory Building RANGED CARRELE			Q Q
Rec'd for sellante	Ö	Accessory Building Addition/Alteration (specify)	,	×)	
6	(
		Special Use: (explain)		×	
2		Conditional Use: (explain)		X)	and an article of the second s
Secretarial Staff		Other: (explain)		×	
	· · · · · · · · · · · · · · · · · · ·				

may be a result of above described pro Owner(s): (If there are Mult erty at FAILURE TO OBTAIN A PERMIT of STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

(Including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which y relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the assonable time for the purpose of inspection.

I the Deed All Owners must sign or letter(s) of authorization must accompany this application) Date

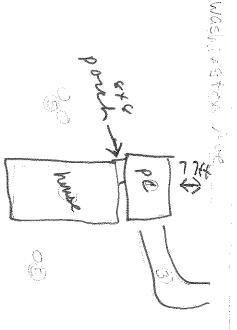
Address to send permit (If you are signing on behalf of the owner(s) a letter of authorization 7887 must accompany this application)

Mashington Washbur

Date

If you recently purchased Attach
Copy of Tax Statement
property send your Recorded Deed

- Show:
- Show any (*): Show any (*):



Please complete (1) - (7) above (prior to continuing)

(8)

Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

			+	Feet	Setback to Privy (Portable, Composting)
			# #	Feet	Setback to Drain Field
S/6 Feet	ام ع	Setback to Well	1	S € Feet	Setback to Septic Tank or Holding Tank
				4	
Feet		Elevation of Floodplain	*	S Feet	Setback from the East Lot Line
□ No	Yes	20% Slope Area on property	jt	25% Feet	Setback from the West Lot Line
Feet	**	Setback from Wetland	¥	206 Feet	Setback from the South Lot Line
			31	<i>叶の</i> り Feet	Setback from the North Lot Line
Feet		Setback from the Bank or Bluff			
Feet		Setback from the River, Stream, Creek	it is	Feet	Setback from the Established Right-of-Way
Feet		Setback from the Lake (ordinary high-water mark)	34	77 Feet	Setback from the Centerline of Platted Road
ement	Measuremen	Description	33	Measurement	Description

roack to Privy (Portable, Composting)

rothe placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously sun reviously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed conner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9)Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code
The local Town, Village, City, State or Federal agencies may also require permits.

Hold For Sanitary: Hold For TBA	Signature of Inspector:	ortained + comp	And recessory up a	Date of Inspection: 6 7 7 6	Inspection Record:	Was Proposed Building Site Delineated Wes Division Was Proposed Building Was Proposed Was Proposed Building Was Proposed W	Granted by Variance (B.O.A.) Yes And Case #:	Is Parcel in Common Ownership	Permit #: 16-0158	Permit Denied (Date):	Issuance Information (County Use Only)
Hold For Affidavit: Hold For Fees:			permit to maple their	1 2		Were Property Lines Represented by Owner ☐¥es Was Property Surveyed ☐ Yes	Previously Granted by Variance (B.O.A.	ous Lot(s)) No Mitigation Required □ Yes Mitigation Attached □ Yes	Permit Date: 6-20-16	Reason for Denial:	Sanitary Number: 1275 # of bedrooms:
ees:	Date of Approval:		ction should	Date of Re-Inspection:	Zoning District & Lakes Classification (Represented by Owner Des DWYEA PLONO INO	(B.O.A.) Case #:	DNo Affidavit Required ☐ Yes DNo Affidavit Attached ☐ Yes A No			ooms: 3 Sanitary Date: 8-12-1